

SENATE CONCURRENT RESOLUTION NO. 5

(By Senators Wells, D. Facemire, Williams, Yost, Sypolt, Unger,
Miller, Laird, Klempa and Edgell)

Requesting the Joint Committee on Government and Finance study the
recruitment, distribution and potential barriers of the
United States Department of Defense's TRICARE healthcare
system among private healthcare practitioners in an effort to
increase the overall acceptance of the TRICARE healthcare
system by the state's private medical practitioners; and to
also determine possible methods aimed at avoiding coverage
gaps during a transition of an individual to or from a public
or private healthcare system to the TRICARE healthcare system.

Whereas, The TRICARE healthcare system is a program of the
United States Department of Defense's Military Health System
through the TRICARE Management Activity; and

Whereas, TRICARE provides healthcare benefits in private
civilian medical practices to military personnel, military
retirees, their dependents, and, in some instances of eligibility,
members of the reserve component of the United States Armed Forces;
and

Whereas, Prior to World War II, health care for military
personnel was provided solely in military medical facilities on a

1 first-come-first-served basis; and

2 Whereas, Due to the influx of returning military personnel
3 after World War II, a great demand was placed on the military
4 medical facilities' resources and system; and

5 Whereas, This increased demand caused Congress to pass
6 legislation in 1956 and 1966 to allow the Secretary of Defense to
7 contract with civilian health care providers to cover the
8 healthcare costs of military personnel outside of the military
9 medical facilities; and

10 Whereas, This program became known as the Civilian Health and
11 Medical Program of the Uniformed Services in 1966 and functioned as
12 such until the mid-1990s when the system was discontinued in favor
13 of the newly created region based TRICARE healthcare system to
14 address the financial burdens and beneficiary dissatisfaction of
15 the previous program and to accommodate advancements in healthcare
16 administration; and

17 Whereas, TRICARE has since been restructured numerous times to
18 accommodate for various regional changes and to implement new
19 benefit package offerings; and

20 Whereas, TRICARE features six benefit package options
21 available for enrollment by eligible military personnel at various
22 costs, if applicable, to the beneficiary; and

23 Whereas, As service members become participants of or leave
24 the TRICARE healthcare system, coverage gaps may occur leaving the
25 beneficiary or their dependents vulnerable to expensive healthcare

1 costs that may otherwise be covered by TRICARE or the separate
2 public or private healthcare system they may be leaving or joining;
3 and

4 Whereas, As TRICARE has few statewide participating private
5 medical practitioners who accept it as a means of payment, the
6 state may have policy and financial abilities to encourage these
7 practitioners to do so; and

8 Whereas, West Virginia has historically been home to more
9 United States Armed Forces service members per capita than any
10 other state in the nation; and

11 Whereas, The State of West Virginia should therefore remain
12 committed to showing its gratitude of these service members and
13 their families by continuing its endeavor of developing and
14 enhancing services directed at providing eligible service members
15 and veterans with healthcare services; therefore, be it

16 *Resolved by the Legislature of West Virginia:*

17 That the Joint Committee on Government and Finance is hereby
18 requested to conduct a study of the recruitment, distribution and
19 potential barriers of the United States Department of Defense's
20 TRICARE healthcare system among private healthcare practitioners in
21 an effort to increase the overall acceptance of the TRICARE
22 healthcare system by the state's private medical practitioners; and
23 to also determine possible methods aimed at avoiding coverage gaps
24 during a transition of an individual to or from a public or private
25 healthcare system to the TRICARE healthcare system; and, be it

1 *Further Resolved*, That the Joint Committee on Government and
2 Finance report to the Legislature, on the first day of the regular
3 session, 2012 on its findings, conclusions and recommendations
4 together with drafts of any legislation to effectuate its
5 recommendations; and, be it

6 *Further Resolved*, That the expenses necessary to conduct this
7 study, to prepare a report and to draft necessary legislation be
8 paid from legislative appropriations to the Joint Committee on
9 Government and Finance.